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APPLICANTS

Paul D. Nizzere, Darien, IL;
 Matthew H. Lawler, Homerglen, IL;
 Carla De Young, Joliet, IL;
 Chris Kulujian, Chicago, IL;
 Morad Ghasselian, Oak Park, IL;
 Theron Kotze, Chicago, IL;
 Timothy A. Bearint, Mokena, IL;

**** CONTINUING DATA *******

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**** FOREIGN APPLICATIONS *********** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ****
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Foreign Priority claimed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Initials	IL	12	27	3

ADDRESS

LEMPIA BRAIDWOOD LLC
 223 W. JACKSON BLVD.
 SUITE 620
 CHICAGO, IL 60606
 UNITED STATES

TITLE

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